

DEPARTMENT OF THE INTERIOR AVIATION MANAGEMENT 300 E. MALLARD DRIVE, SUITE 200 BOISE, IDAHO 83706-3991 Questions, call 208-433-5026 OR applicable Regional Office				EVALUATION REPORT ON CONTRACTOR PERFORMANCE (TECHNICAL INSPECTION)					
				Source Selection Information Not for Public Release (see FAR 3.104 & 42.1503)					
COTR'S REPRESENTATIVE				CONTRACTOR/VENDOR					
INSPECTION DATE				RETURN TO APPLICABLE AM ISSUING OFFICE					
INSPECTION LOCATION				<input type="checkbox"/> CONTRACT <input type="checkbox"/> ARA <input type="checkbox"/> OTHER					
INSPECTION TYPE		<input type="checkbox"/> Scheduled <input type="checkbox"/> Other, specify		<input type="checkbox"/> HELICOPTER <input type="checkbox"/> AIRPLANE <input type="checkbox"/> AIRTANKER/SEAT					
INSTRUCTIONS If you have excel, this form may be filled in on the computer or a blank form can be printed and filled in by hand. Use the mouse to navigate. To check or uncheck a box, left 'click' the box. Comment boxes are formatted to automatically wrap the entered text. Check the box that best describes the level in which the Contractor supported the area described. Comments are helpful and substantiate either very high or very low ratings. If additional space is needed, use page 2 of the form or attach additional page(s). N/A means not applicable. <i>A copy of this report may be used in future evaluations of the Contractor's past performance and is provided to the Contractor (without your identity).</i>									
1. Were the Contractor's aircraft, associated equipment and maintenance records available for inspection as schedules?									
UNSATISFACTORY	N/A	1	2	3	4	5	6	7	EXCELLENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Did the Contractor's aircraft, equipment and maintenance records conform to the terms of the procurement document?									
UNSATISFACTORY	N/A	1	2	3	4	5	6	7	EXCELLENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Were the Contractor personnel (pilot, driver, mechanic) as appropriate, available for inspection as scheduled?									
UNSATISFACTORY	N/A	1	2	3	4	5	6	7	EXCELLENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Did the Contractor's personnel conform to the terms of the procurement document?									
UNSATISFACTORY	N/A	1	2	3	4	5	6	7	EXCELLENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Was the Contractor and/or on-site representative(s) professional, reasonable, and cooperative during the inspection(s)?									
Unsatisfactory	N/A	1	2	3	4	5	6	7	EXCELLENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Will a reinspection be required? NO <input type="checkbox"/> YES <input type="checkbox"/> Insert additional comments below									
Name and Title of Individual Completing this Form									
Signature					Telephone Number			Date	